



School Community Council Nomination Form

Nominee: _____

School: _____

Contact Information:

I am standing for election as (Check One):

A Parent: A Community Member Other (please specify) _____

Supporting Parent or Community Member:

Name: _____ Signature: _____
(Supporting Parent/Community Member)

Please drop off or mail your Nomination Form to your local school.

For Office Use Only:

Received by: _____

Date: _____